

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/661,449
Filing Date	September 13, 2003
First Named Inventor	Alben Gillum
Art Unit	3621
Examiner Name	UNKNOWN
Attorney Docket Number	38494-00252
Total Number of Pages in This Submission	2

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Ivan J. Mlachak
Signature	
Date	December 31, 2003

**CERTIFICATE OF TRANSMISSION/MAILING**

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Typed or printed name	Melissa J. Leffler		
Signature		Date	December 31, 2003

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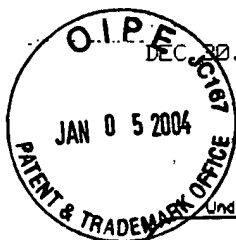
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PTO/SB/81 (05-03)

Approved for use through 11/30/2005. OMB 0551-0036

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number

Filing Date

September 13, 2003

First Named Inventor

Alben J. GILLUM

Title

METHOD FOR DETECTING

Art Unit

UNKNOWN

Examiner Name

UNKNOWN

Attorney Docket Number

38494-00252

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Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name

William A. Campbell

Signature

Date

12/30/97

Telephone

202-268-3816

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



\*Total of \_\_\_\_\_ forms are submitted.

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